COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL030787 US

As a below named inventor, I hereby declare that:					
My residence, post office address and citizenship are as stated next to my name.					
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: PRECURSOR SOLUTION, METHOD OF PREPARATION THEREOF AND USE THEREOF the specification of which (check only one item below):					
is attached hereto.					
was filed as United States a	application				
Serial No					
on					
and was amended					
on					
was filed as PCT internation Number PCT/IB2004/0510 on 01 July 2004	• •				
and was amended under PCT	Article 19		(if applicable).		
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:					
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:					
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119		
Europe	03102022.5	04 July 2003	YES		
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			J		

Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number PHNL030787 US							
POWE transac	ER OF ATTORNE ct all business in the	Y: As a named inventor Patent and Trademark	, I hereby appoint Office connected t	the following attorney(s) and/o therewith. (List name and regis	or agent(s) to p stration number	rosecute this application and r)	
Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32, 266 Edward M. Blocker, Reg. No. 30,245			Direct Telephone Calls to: (name and telephone number) (914)332-0222				
FULL NAME OF INVENTOR		FAMILY NAME MEYER		FIRST GIVEN NAME Joerg		SECOND GIVEN NAME	
-	RESIDENCE & CITIZENSHIP	Aachen POST OFFICE ADDRESS Suermondtplatz 8		STATE OR FOREIGN COUNTRY Germany		Germany	
	POST OFFICE ADDRESS			D-52062 Aachen		STATE & ZIP CODE/COUNTRY Germany	
202 RESIDE	FULL NAME OF INVENTOR	FAMILY NAME KLEE		FIRST GIVEN NAME Mareike		SECOND GIVEN NAME Katharine	
	RESIDENCE & CITIZENSHIP	Hueckelhoven POST OFFICE ADDRESS Randerather Weg 27		STATE OR FOREIGN COUNTRY Germany CITY D-41836 Hueckelhoven		Germany	
	POST OFFICE ADDRESS					STATE & ZIP CODE/COUNTRY Germany	
	FULL NAME OF INVENTOR	FAMILY NAME KIEWITT		FIRST GIVEN NAME Rainer		SECOND GIVEN NAME	
203	RESIDENCE & CITIZENSHIP	Roetgen POST OFFICE ADDRESS Bahnhofstrasse 10		STATE OR FOREIGN COUNTRY Germany		Germany	
	POST OFFICE ADDRESS			D-52159 Roetgen		STATE & ZIP CODE/COUNTRY Germany	
to be tr or impr	rue: and further that	these statements were i under section 1001 if Titl	made with the kno	wledge that willful false statem	ents and the li	information and belief are believed the so made are punishable by fine ments may jeopardize the validity of	
SIGNATURE OF INVENTOR 201 JOYG Muye			11 10 00 11 80		P. Krint		

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

03 February 2005

(July 1994)

03 February 2005

DATE

DATE

03 February 2005

PTO/SB/80 (11-04)
Approved for use through 11/30/2005. OMB 0651-0035
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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

Practitioners associated with the Customer Number: 24737	I hereby 37 CFR	revoke all previous powers of 3.73(b).	of attorney giver	in the applic	ation identified	in the at	tached stater	ment under
Practitioner(e) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name	I hereby	appoint:	F					
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name	X Prac	ctitioners associated with the Custor	mer Number:	247	37			
as attorney(e) or agent(e) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned and to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b) for the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b) for the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b) for Individual Name Address City State Zip Country Telephone Fax Assignee Name and Address: KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioners appointed in this form if the appointed practitioners and must identify the application in which this Power of Attorney is to be filed. Signature Date 14 January 2005 Name Michael E. Marion Telephone (914) 3333–9637	OR		L_					
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: X	Prac	titioner(s) named below (if more that	an ten patent practit	ioners are to be	named, then a cus	tomer num	ber must be use	ed):
any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:		Name				Name		
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The address associated with Customer Number: OR Firm or Individual Name Address City Country Telephone Assignee Name and Address: KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. Signature Signature Oate 14 January 2005 Name Michael E. Marion Telephone (914) 333-9637	any and all	patent applications assigned only to	o the undersigned a	United States Paccording to the U	atent and Tradema JSPTO assignmer	ark Office (i t records o	USPTO) in conn or assignment do	ection with xcuments
Firm or Individual Name Address	Please cha	nge the correspondence address fo	or the application ide	entified in the atta	iched statement u	nder 37 CF	R 3.73(b) to:	
Firm or Individual Name Address			[
Firm or Individual Name Address City Country Telephone KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. Signature Signature Signature Date 14 January 2005 Name Michael E. Marion Telephone (914) 333-9637	X T	he address associated with Custom	ner Number:	2473	7			
Address City State Zip Country Telephone Fax Assignee Name and Address: KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. Signature Signature Date 14 January 2005 Name Michael E. Marion Telephone (914) 333-9637			<u> </u>					
Assignee Name and Address: KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. Signature Signature Date 14 January 2005 Name Michael E. Marion Telephone (914) 333-9637								
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Name Michael E. Marion Telephone (914) 333-9637								
	Signature	Mustante	. Her	n		Date 14	4 Januar	y 2005
	Name	ame Michael E. Marion Telephone (914) 333-96			33-9637			
	Title	Authorized Repr	esentative	е		<u> </u>		

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

10/562537IAP15 Rec'd PCT/PTO 28 DEC 2005

PTO/SB/96 (08-03)

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<u>s1</u>	TATEMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Koninklijke Philips Ele	ectronics N.V.
Application No./Patent No.: Concurrently	Filed/Issue Date: Concurrently
Entitled: PRECURSOR SOLUTION, METHOD	O OF PREPARATION THEREOF ANDUSE THEREOF
Koninklijke Philips Electronics N.V. (Name of Assignee)	, a <u>corporation</u> (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1. ☑ the assignee of the entire right, title, a	nd interest; or
2. an assignee of less than the entire right. The extent (by percentage) of its owner in the patent application/patent identified about.	ership interest is ———— %
	the patent application/patent identified above. The assignment was recorded mark Office at Reel, Frame, or for which a copy thereof is
OR	
below:	the patent application/patent identified above, to the current assignee as shown To:
The document was recorded in	the United States Patent and Trademark Office at, or for which a copy thereof is attached.
2. From:	To:
Reel, Frame	the United States Patent and Trademark Office at , or for which a copy thereof is attached.
From: The document was recorded in Reel, Frame	the United States Patent and Trademark Office at e, or for which a copy thereof is attached.
[] Additional documents in the ch	ain of title are listed on a supplemental sheet.
[] Copies of assignments or other documer [NOTE: A separate copy (i.e., the original must be submitted to Assignment Division recorded in the records of the USPTO.	al assignment document or a true copy of the original document) on in accordance with 37 CFR Part 3, if the assignment is to be
The undersigned (whose title is supplied bel	ow) is authorized to act on behalf of the assignee. John Votoglia, Reg. 36,299
Date	typed or printed name
(914) 333-9693 Telephone number	Signature Ogoe
	Corporate Counsel
	Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.